

PATENT
2024730-2247307153

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Jonathan S. Stinson

Serial No.: 09/852,541

Filed: May 10, 2001

For: NEUROANEURYSM OCCLUSION
AND DELIVERY DEVICE AND METHOD
OF USING SAME

Group Art Unit: 3738

Examiner: Cheryl L. Miller

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TECHNOLOGY CENTER R3700

RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:


In response to the Office Communication mailed June 18, 2003 regarding Restriction Requirement, Applicant hereby elects the specie(s) that corresponds to the embodiment shown in Figure 9 of the application.

If the Examiner has any questions or comments regarding this response, the Examiner is respectfully requested to contact the undersigned at the number listed below.

Respectfully submitted,

Bingham McCutchen LLP

Dated: 7/18/03

By: 
Gerald Chan
Reg. No. 51,541

Bingham McCutchen LLP
Three Embarcadero Center
San Francisco, California 94111
(650) 849-4960

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RESPONSE TO RESTRICTION REQUIREMENT TRANSMITTAL

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. Documents enclosed:

Transmitted herewith in response to Office Communication, mailed June 18, 2003, for the above-identified application, are the following:

- ☒ Response to Restriction Requirement (2 pages)
- ☒ Transmittal with certificate of mailing (2 pages)

CERTIFICATE OF MAILING TRANSMISSION
(37 C.F.R. §1.8)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposit with the Unites States Postal Services on the date shown below with sufficient postage as "First Class Mail" to addressee in an envelope addressed to the M/S: Non-Fee, Commissioner for Patents, P.O. Box 1450, Washington, D.C. 22313-1450.

July 18, 2003

Date of deposit

Carolyn Tobias

Name of Person transmitting Paper

Signature of Person depositing Paper

☒ If any extension fee is required, please consider this a petition therefor.


3. **Method of Payment of fee:**

- ☐ Check in the amount of \$_____ is enclosed to cover the above fee(s).
- ☐ Charge Bingham McCutchen's Deposit Account No. **50-2518** in the amount of _____.
- ☒ The Commissioner is authorized to charge Bingham McCutchen's Deposit Account No. **50-2518** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account No. **50-2518**.

Respectfully submitted,

BINGHAM McCUTCHEN LLP

Dated: 7/18/03

By: 
Gerald Chan
Reg No. 51,541

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